

# TRS FALL 2008 REGISTRATION FORM

Please return to:

Cobb County Parks, Recreation & Cultural Affairs (CCPRCAD), TRS Unit / 555 Nickajack Road / Mableton, GA 30126

Participant Full Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_, GA Zip \_\_\_\_\_ County \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Group Home Case Mgr & # \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_ Pager Number ( ) \_\_\_\_\_

Alternate Emergency Contact \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone/Pager ( ) \_\_\_\_\_

Do you pay city property taxes? \_\_\_\_yes \_\_\_\_no E-mail address \_\_\_\_\_

## Check the programs for which you want to register: \*All programs for 16 & up unless otherwise noted

Social Club.....(see below).....\$35 _____	Tennis Class.....# 18795.....\$20 _____	Holiday Dance.....#18883.....\$10 _____
Swim - Beginners.....# 18919.....\$60 _____	Falcons VS Bears.....# 18799.....\$125 _____	Parent's Day Out.....#18908.....\$8 _____
Swim - Intermediate...# 18918.....\$60 _____	Pottery Class.....# 18882.....\$65 _____	
Costume Ball.....#18800.....\$10 _____	Thanksgiving Dinner...# 18875.....\$20 _____	
Dance Class (12&up).# 19066.....\$20 _____	Six Flags Fright Night...# 18797.....\$48 _____	
Afternoon Bowling....# 18796.....\$30 _____	Six Flags ( with season tix) #18798..\$15 _____	Optional Insurance (Once Yearly).....\$6 _____
		Non-Resident Fee of \$25.....\$25 _____

Total Fees Paid : \$ \_\_\_\_\_

Member of \_\_\_\_\_ Social Club (must have been assigned to a social club by staff)

AGES 16&up: Explorers 21& 41- # 18786 Explorers 31 - # 18787 Red Dreamers - # 18788

Yellow Dreamers - # 18789 Blue & Green Dreamers - # 18790 Drifters - # 18791 Travelers - # 18792 Voyagers - # 18793

## REGISTRATION POLICIES & PROCEDURES

**Registration is August 13, 2008.** Walk-ins from 10am-2pm. **Mail registration form and payment to:**

Therapeutic Recreation Services, 555 Nickajack Road, Mableton, GA 30126 (Make checks or money orders payable to: **CCPRCAD**)

**Payment Policy:** Full payment of program fees must be included with the registration form. No partial payments will be accepted. **We now accept MasterCard & Visa.** Please **do not** write your credit card number on the registration form to mail in. Credit card payments must be done in person or over the phone. **Make checks and money orders payable to CCPRCAD** and put driver's license number on your check. **THERE WILL BE A \$25 FEE ON ANY CHECKS RETURNED UNPAID BY YOUR BANK.**

**Non-Resident Policy:** A mandatory \$25 non-resident fee will be charged to all out-of-county residents participating in this Cobb County program.

**Refund Policy:** Refunds will be issued only if TRS has not incurred costs due to purchase of tickets, rentals, supplies, refreshments, deposits, etc. Refund requests must be made a minimum of 5 work days before the program.

Participants will not receive a refund or credit for any missed special events, social club events or other programs.

Social Clubs and all TRS special events or classes must be PAID IN FULL. No Exceptions. Refunds will be processed at the end of the quarter.

**Inclement Weather:** If a program is canceled by the department due to weather, the program will be made up at a later date or refunds issued.

**\*We must have an updated medical form in our office at all times. They are good for two years unless there have been changes.**

When providing transportation, do you require wheelchair accessibility? (check one) \_\_\_\_Yes or \_\_\_\_No

Please specify the drop off/pick up location you will be regularly using. (check one) \_\_\_\_CSP or \_\_\_\_RSBC

## FOR STAFF USE ONLY

Total Amt. Paid \$ \_\_\_\_\_ Receipt # \_\_\_\_\_ Check # \_\_\_\_\_ MC/Visa Authorization Code # \_\_\_\_\_

Name on Receipt \_\_\_\_\_ Date \_\_\_\_\_ Staff Initials \_\_\_\_\_

*Serving Special People With Special Needs*